

MULTIPLE INDEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10727313	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1		/		/			51						
2		/		/			52						
3		/		/			53						
4		3		/			54						
5		1		/			55						
6		1		/			56						
7		1		/			57						
8		1		/			58						
9		1		/			59						
10		1		/			60						
11		1		/			61						
12		1		/			62						
13		1		/			63						
14		1		/			64						
15		1		/			65						
16	/			/			66						
17		4		/			67						
18		/		/			68						
19		/	/	/			69						
20		/	/	/			70						
21	/	/	/	/			71						
22	/	/	/	/			72						
23	/	/	/	/			73						
24	/	/	/	/			74						
25	/	/	/	/			75						
26	/	/	/	/			76						
27	/	/	/	/			77						
28	/	/	/	/			78						
29	/	/	/	/			79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	10		4				TOTAL IND.						
TOTAL DEP.	21	←	21	←			TOTAL DEP.	←	←	←	←	←	
TOTAL CLAIMS	31		23				TOTAL CLAIMS						